





WA Primary Health Alliance PHN Urgent Care Clinics Program Perth North 2024/25 - 2027/28 Activity Summary View

Approved by the Australian Government Department of Health, Disability and Ageing, November 2025





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UCC-MUCC 1000 - Urgent Care Clinics - Perth City



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC-MUCC

Activity Number

1000

Activity Title

UCC-MUCC 1000 - Urgent Care Clinics - Perth City

Existing, Modified or New Activity

Existing



Activity Priorities and Description

Program Key Priority Area

Population Health

Aim of Activity

Strengthening primary health care and ensuring all Australians have access to affordable primary care services is a priority for the Australian Government Department of Health, Disability and Ageing.

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours and accept walk-in patients for specified urgent care presentations.

The Medicare UCCs will be:

- Based in existing general practitioner (GP) clinics or Aboriginal Controlled Community Health Service (ACCHS).
- Open extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).

Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and co-designed with relevant stakeholders to ensure connectivity to existing community health services, GPs, non-government sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:



- Improve access to urgent care in a non-hospital setting, particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening.
- Support integration with existing local health services and complement general practice.

Description of Activity

Activity 1.1 – Perth City Medicare Urgent Care Clinic

Background

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) as designated commissioner, to deliver Medicare Urgent Care Clinics (MUCC) in eight designated WA locations; focused on specified actions that are intended to reduce pressure on emergency departments (ED).

In February 2023, WAPHA undertook an Expression of Interest (EOI) process to identify eligible providers in the Perth City SA3 including general practices and Aboriginal Community Controlled Health Services (ACCHS) that are suitable to operate a Medicare UCC.

The tender for Perth City MUCC was awarded to Rudloc Road Medical and Dental Centre, 40 Rudloc Road, Morley, WA 6062 operating under the ForHealth corporate group. Located 9km from Royal Perth ED, the Medicare UCC is open 365 days per year to provide Urgent Care services to the local community. Hours vary per location based on local need, trends in ED demand and other considerations such as workforce. WAPHA works with providers to review hours at regular intervals.

Roles and responsibilities

WA Primary Health Alliance's Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PNPHN Perth City MUCC activity. An executive sub-committee oversees all PNPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026. WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with East Metro Health Service and Royal Perth Hospital, and working with the Department of Health, Disability and Ageing to monitor and support Medicare UCC operations, including compliance and contractual requirements.

Key Activities

WAPHA will work with the Perth City MUCC team to understand, establish and maintain compliance with:

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, access to pathology as well as an x-ray facility and access to other radiology services.
- MUCC design principles. Ensuring that the MUCC is patient-focused, improving access across extended hours to episodic urgent medical care without a fee, support people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.
- Data onboarding and collection. The Department of Health, Disability and Ageing has identified key measures of success to inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system.

 Priorities for the year ahead
- Work with the MUCC to improve public awareness about when it is appropriate to seek medical assistance via a UCC, and when assistance should be sought from an emergency department.
- Support the MUCC to strengthen integration and referral pathways between the UCC and hospital care, including investigation of direct referral via the WA Virtual Emergency Department (WAVED), and ongoing engagement with the WA Health System Improvement Unit.
- Ongoing strengthening of the WA MUCC Collaborative group, which meets quarterly and is a forum for MUCC employee networking and discussion, troubleshooting, ongoing education and collaboration.



- Implementation of new contract management processes including monthly reporting and detailed reporting templates.
- Work with MUCCs to provide a culturally safe, inclusive and welcoming environment for Aboriginal and Torres Strait Islander people.

Governance

The WA Medicare UCC Steering Committee has been established and meets regularly with representatives from WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and the Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee.

Department of Health, Disability and Ageing

A Memorandum of Understanding has been executed between East Metro Health Service, WA Department of Health and WAPHA, with all parties participating in a regular integration working groups to develop streamlined pathways and communication channels to further enhance access to urgent care for the community.

Needs Assessment Priorities

Needs Assessment

WAPHA Needs Assessment 2025-2027

Priorities

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



Activity Demographics

Target Population Cohort

The Perth City SA3 community, as well as visitors to the region, with urgent care needs.

Indigenous Specific

No

Coverage

Whole Region

No

SA3 Name	SA3 Code
Perth City	50302





Activity Consultation and Collaboration

Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- Hospital emergency department teams
- WA Health management
- WA GP Urgent Care network
- National Health Service Directory
- Health Direct
- Department of Health, Disability and Ageing
- Other National PHNs commissioning UCCs
- Aboriginal Medical Services

Collaboration

This activity was designed and implemented in collaboration with the following stakeholders:

- Hospital emergency department teams for the development and implementation of pathways of care
- WA Health management for strategic oversight of the UCC activity
- Department of Health, Disability and Ageing as funder and for policy and communications resource
- Perth North Health Service Providers for development of specific UCC models in designated regions
- Department of Premier and Cabinet for strategic oversight of UCC activity
- Local health care providers including Radiology and Pathology for design of patient pathway
- General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)
- Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCCs



Activity Milestone Details/Duration

Activity Start Date

31/08/2025

Activity End Date

29/06/2028

Service Delivery Start Date

30/06/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Activity Work Plan Due: 30/4/25, 30/4/26, 30/4/27, 30/4/28 Annual Needs Assessment Due: 15/11/25, 15/11/26, 15/11/27

12-month Performance Report Due: 30/9/25, 30/9/26, 30/9/27, 30/9/28

Final Performance Report Due: 30/9/28

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Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No **Open Tender:** No

Expression Of Interest (EOI): Yes

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$2,743,660.00	\$1,902,593.69	\$1,934,937.78	\$0.00	\$0.00	\$6,581,191.47
Total	\$2,743,660.00	\$1,902,593.69	\$1,934,937.78	\$0.00	\$0.00	\$6,581,191.47



UCC-MUCC 1010 - Medicare Urgent Care Clinics - Clarkson



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC-MUCC

Activity Number

1010

Activity Title

UCC-MUCC 1010 - Medicare Urgent Care Clinics - Clarkson

Existing, Modified or New Activity

Existing



Activity Priorities and Description

Program Key Priority Area

Population Health

Aim of Activity

Strengthening primary health care and ensuring all Australians have access to affordable primary care services is a priority for the Australian Government Department of Health, Disability and Ageing.

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours and accept walk-in patients for specified urgent care presentations.

The Medicare UCCs will be:

- Based in existing GP clinics or Aboriginal Controlled Community Health Service (ACCHS).
- Open extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).

Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular general practitioner (GP) or care provider to ensure that the patient receives continuity of care.



All referral pathways into and out of the Medicare UCC should be driven by local need and co-designed with relevant stakeholders to ensure connectivity to existing community health services, GPs, non-government sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening. Support integration with existing local health services and complement general practice.

Description of Activity

Activity 1.2 – Clarkson Medicare Urgent Care Clinic – operating from August 2023. Background

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) as designated commissioner, to deliver Medicare Urgent Care Clinics in eight designated WA locations; focused on specified actions that are intended to reduce pressure on emergency departments (ED).

•In February 2023, WAPHA undertook an Expression of Interest (EOI) process to identify eligible providers in the Clarkson SA2 area including general practices, and Aboriginal Community Controlled Health Services (ACCHS) that are suitable to operate a Medicare UCC. A preferred provider was not identified in the initial EOI process. The contract for Clarkson MUCC was awarded to Ocean Keys Family Practice, 2 Ebb Way, Clarkson, WA 6030 following detailed discussions with the Department of Health, Disability and Ageing and a sole source procurement process. The clinic is owner operated with the Practice Principle leading the delivery of the Urgent Care Clinic. Located 10km from Joondalup Health Campus ED, the Medicare UCC is open 365 days per year to provide Urgent Care services to the local community. Hours vary per location based on local need, trends in ED demand and other considerations such as workforce. WAPHA works with providers to review hours at regular intervals.

Roles and responsibilities

WA Primary Health Alliance's Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PNPHN Clarkson MUCC activity. An executive sub-committee oversees all PNPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026. WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with North Metro Health Service, Joondalup Health Campus, Perth Children's Hospital, and working with the Department to monitor and support Medicare UCC operations, including compliance and contractual requirements.

Key Activities

WAPHA will work with the Clarkson MUCC team to understand, establish and maintain compliance with:

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, access to pathology as well as x-ray facilities and other radiology services.
- MUCC design principles. Ensuring that the MUCC is patient-focused, improving access across extended hours to episodic urgent medical care without a fee, support people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.
- Data onboarding and collection. The Department of Health, Disability and Ageing has identified key measures of success to inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system. Priorities for the year ahead
- Work with the MUCC to improve public awareness about when it is appropriate to seek medical assistance via a UCC, and when assistance should be sought from an emergency department.



- Support the MUCC to strengthen integration and referral pathways between the UCC and hospital care, including investigation of direct referral via the WA Virtual Emergency Department (WAVED), and ongoing engagement with the WA Health System Improvement Unit.
- Ongoing strengthening of the WA MUCC Collaborative group, which meets quarterly and is a forum for MUCC employee networking and discussion, troubleshooting, ongoing education and collaboration.
- Implementation of new contract management processes including monthly reporting and detailed reporting templates.
- Work with MUCC's to provide a culturally safe, inclusive and welcoming environment for Aboriginal and Torres Strait Islander people.

Governance

The WA Medicare UCC Steering Committee has been established and meets regularly with representatives from the WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee.

A Memorandum of Understanding has been executed between North Metro Health Service, WA Department of Health and WAPHA, with all parties participating in a regular integration working groups to develop streamlined pathways and communication channels to further enhance access to urgent care for the community.

Needs Assessment Priorities

Needs Assessment

WAPHA Needs Assessment 2025-2027

Priorities

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



Activity Demographics

Target Population Cohort

The Wanneroo SA3 community, as well as visitors to the region, with urgent care needs.

Indigenous Specific

No

Coverage

Whole Region

No

SA3 Name	SA3 Code
Wanneroo	50503





Activity Consultation and Collaboration

Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- Hospital emergency department teams
- WA Health management
- WA GP Urgent Care network
- National Health Service Directory
- Health Direct
- Department of Health, Disability and Ageing
- Other National PHNs commissioning UCCs
- Aboriginal Medical Services

Collaboration

The PHN has involved the following stakeholders in activity design and implementation:

- · Hospital emergency department teams for the development and implementation of pathways of care
- WA Health management for strategic oversight of the UCC activity
- Department of Health, Disability and Ageing as funder and for policy and communications resource
- Perth North Health Service Providers for development of specific UCC models in designated regions
- Department of Premier and Cabinet for strategic oversight of UCC activity
- Local health care providers including Radiology and Pathology for design of patient pathway
- General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)
- Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCCs



Activity Milestone Details/Duration

Activity Start Date

31/08/2025

Activity End Date

29/06/2028

Service Delivery Start Date

30/06/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Activity Work Plan Due: 30/4/25, 30/4/26, 30/4/27, 30/4/28 Annual Needs Assessment Due: 15/11/25, 15/11/26, 15/11/27

12-month Performance Report Due: 30/9/25, 30/9/26, 30/9/27, 30/9/28

Final Performance Report Due: 30/9/28

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Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: Yes

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$4,675,003.00	\$3,644,201.78	\$3,688,813.20	\$0.00	\$0.00	\$12,008,017.98
Total	\$4,675,003.00	\$3,644,201.78	\$3,688,813.20	\$0.00	\$0.00	\$12,008,017.98



UCC-MUCC 1020 - Medicare Urgent Care Clinics - Midland



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC-MUCC

Activity Number

1020

Activity Title

UCC - MUCC 1020 - Medicare Urgent Care Clinics - Midland

Existing, Modified or New Activity

Existing



Activity Priorities and Description

Program Key Priority Area

Population Health

Aim of Activity

Strengthening primary health care and ensuring all Australians have access to affordable primary care services is a priority for the Australian Government Department of Health, Disability and Ageing.

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours and accept walk-in patients for specified urgent care presentations.

The Medicare UCCs will be:

- Based in existing GP clinics or Aboriginal Controlled Community Health Service (ACCHS).
- Open extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).

Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and co-designed with relevant stakeholders to ensure connectivity to existing community health services, general practitioners (GPs), non-government sector, state and territory funded services, hospital and ambulatory services and other



support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening.
- Support integration with existing local health services and complement general practice.

Description of Activity

Activity 1.3 – Midland Medicare Urgent Care Clinic – operating from 11 December 2023. Background

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) as designated commissioner, to deliver Medicare Urgent Care Clinics in eight designated WA locations; focused on specified actions that are intended to reduce pressure on emergency departments (ED).

In May 2023, WAPHA undertook an Expression of Interest (EOI) process to identify eligible providers in the Midland-Guildford SA2 area including general practices and Aboriginal Community Controlled Health Services (ACCHS) that are suitable to operate a Medicare UCC.

The tender for Midland MUCC was awarded to North Street Medical Centre, 40 Great Northern Highway, Midland, WA 6056 operating under the Brecken Health corporate group. Located 2km from St John of God Midland ED, the Medicare UCC are open 365 days per year to provide Urgent Care services to the local community. Hours vary per location based on local need, trends in ED demand and other considerations such as workforce. WAPHA works with providers to review hours at regular intervals.

Roles and Responsibilities

WA Primary Health Alliance's Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PNPHN Midland MUCC activity. An executive sub-committee oversees all PNPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026. WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with East Metro Health Service and St John of God Midland, and working with the Department of Health, Disability and Ageing to monitor and support Medicare UCC operations, including compliance and contractual requirements.

Key Activities

WAPHA will work with the Midland MUCC team to understand, establish and maintain compliance with:

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, pathology as well as x-ray facilities and other radiology services.
- MUCC Design principles. Ensuring that the MUCC is patient-focused, improving access across extended hours to episodic urgent medical care without a fee, support people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.
- Data onboarding and collection. The Department of Health, Disability and Ageing has identified key measures of success to inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system. Priorities for the year ahead
- Work with the MUCC to improve public awareness about when it is appropriate to seek medical assistance via a UCC, and when assistance should be sought from an emergency department.
- Support the MUCC to strengthen integration and referral pathways between the UCC and hospital care, including investigation of direct referral via the WA Virtual Emergency Department (WAVED), and ongoing engagement with the WA Health System Improvement Unit.



- Ongoing strengthening of the WA MUCC Collaborative group, which meets quarterly and is a forum for MUCC employee networking and discussion, troubleshooting, ongoing education and collaboration.
- Implementation of new contract management processes including monthly reporting and detailed reporting templates.
- Work with MUCC's to provide a culturally safe, inclusive and welcoming environment for Aboriginal and Torres Strait Islander people.

Governance

The WA Medicare UCC Steering Committee has been established and meets regularly with representatives from WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and the Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee.

A Memorandum of Understanding has been executed between East Metro Health Service, the WA Department of Health and WAPHA, with all parties participating in a regular integration working groups to develop streamlined pathways and communication channels to further enhance access to urgent care for the community.

Needs Assessment Priorities

Needs Assessment

WAPHA Needs Assessment 2025-2027

Priorities

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



Activity Demographics

Target Population Cohort

The Midland-Guilford SA2 community, as well as visitors to the region, with urgent care needs.

Indigenous Specific

No

Coverage

Whole Region

No

SA3 Name	SA3 Code
Swan	50403





Activity Consultation and Collaboration

Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- Hospital emergency department teams
- WA Health management
- WA GP Urgent Care network
- National Health Service Directory
- Health Direct
- Department of Health, Disability and Ageing
- Other National PHNs commissioning UCCs
- Aboriginal Medical Services

Collaboration

The PHN has collaborated with the following stakeholders in design and implementation:

- Hospital emergency department teams for the development and implementation of pathways of care
- WA Health management for strategic oversight of the UCC activity
- Department of Health, Disability and Ageing as funder and for policy and communications resource
- Perth North Health Service Providers for development of specific UCC models in designated regions
- Local health care providers including Radiology and Pathology for design of patient pathway
- General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)
- · Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCCs



Activity Milestone Details/Duration

Activity Start Date

31/08/2025

Activity End Date

29/06/2028

Service Delivery Start Date

30/06/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Activity Work Plan Due: 30/4/25, 30/4/26, 30/4/27, 30/4/28 Annual Needs Assessment Due: 15/11/25, 15/11/26, 15/11/27

12-month Performance Report Due: 30/9/25, 30/9/26, 30/9/27, 30/9/28

Final Performance Report Due: 30/9/28



Activity Commissioning



Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No **Open Tender:** No

Expression Of Interest (EOI): Yes

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$2,411,652.00	\$2,264,469.63	\$2,296,441.76	\$0.00	\$0.00	\$6,972,563.39
Total	\$2,411,652.00	\$2,264,469.63	\$2,296,441.76	\$0.00	\$0.00	\$6,972,563.39



UCC-MUCC - 1030 - Urgent Care Clinics - Yanchep



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC-MUCC

Activity Number

1030

Activity Title

Urgent Care Clinics - Yanchep

Existing, Modified or New Activity

New Activity



Activity Priorities and Description

Program Key Priority Area

Population Health

Aim of Activity

Strengthening Medicare and ensuring all Australians have access to affordable, high quality primary care services, when and where they need it is a priority for the Australian Government Department of Health, Disability an Ageing. A key objective of this commitment is to expand access to bulk billing Medicare Urgent Care Clinics (MUCCs).

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours 365 days a year and accept walk-in patients for specified urgent care presentations.

The Medicare UCCs will be:

- Co-located/partnered with a general practice that is accredited to a recognised and relevant standard such as the Royal Australian College of General Practitioner Standards for General Practice.
- Co-located with, or partnered alongside, General Practices that offer full bulk billing, where local circumstances allow.
- Operate extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).



Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and codesigned with relevant stakeholders to ensure connectivity to existing community health services, GPs, nongovernment sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening. Support integration with existing local health services and complement general practice.

Description of Activity

Yanchep Medicare Urgent Care Clinic

Background

In 2025 the Australian Government has committed \$664.3 million to establish 50 additional Medicare Urgent Care Clinics (MUCCs) across Australia, six of which will be located in Western Australia. These new clinics will be located in, or near, Bateman, Ellenbrook, Mirrabooka, Yanchep, Mundaring and Geraldton. Once established there will be a total of 14 MUCCs in WA.

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) to commission the six new MUCCs, focussed on specified actions that are intended to reduce pressure on emergency departments (ED) and improve access to urgent care for the local communities.

In September 2025, WAPHA undertook a competitive tender process for the establishment of Yanchep MUCC, the new clinic is expected to open in February 2026.

Roles and Responsibilities

WA Primary Health Alliance's (WAPHA's) Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PNPHN Yanchep MUCC activity. An executive sub-committee oversees all PNPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026.

WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with North Metro Health Service, Joondalup Health Campus, Perth Children's Hospital, and working with the Department of Health, Disability and Ageing to monitor and support Medicare UCC operations, including compliance and contractual requirements.

Key activities

WAPHA will undertake a rigorous tender evaluation process to select an accredited and capable general practice or Aboriginal Community Controlled Health Service located in or near the Yanchep area. Once the successful provider is identified and commissioned, WAPHA will work with the provider to ensure understanding of, establishment of and maintain compliance with:

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities, access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, pathology as well as an x-ray facility and access to other radiology services.
- MUCC design principles. Ensuring that the MUCC is patient-focused, culturally appropriate and supports people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.



- Data onboarding and collection. Ensure utilisation of the Medicare UCC Data Module/Patient Management System and provide support to complete new fields where required to ensure collection of activity data and inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system. Priorities for the next twelve months
- Commission an appropriate and capable provider to establish the MUCC
- Support the provider to meet all compliance and regulatory requirements of the MUCC operational guidelines
- Support the provider to commence service delivery prior to end of February 2026
- Support the provider to engage with key stakeholders to establish referral pathways
- Ensure the provider implements all data collection and reporting requirements
- Utilise the existing Memorandum of Understanding between North Metropolitan Health Service, the WA Department of Health and WAPHA, with all parties participating in a regular integration working group to develop streamlined pathways and communication channels to further enhance access to urgent care for the community.

Governance

The WA Medicare UCC steering committee has been established and meets regularly with representatives from the WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and the Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee. Internal oversight of progress, risk management and monitoring of the MUCC commissioning activities and ongoing performance is provided by an executive sub-committee, the Population Health Strategic Alignment Group.

Needs Assessment Priorities

Needs Assessment

WAPHA Needs Assessment 2025-2027

Priorities

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



Activity Demographics

Target Population Cohort

People with urgent care needs that cannot be addressed in a timely manner by their usual GP, and who do not need emergency treatment.

Indigenous Specific

No



Coverage

Whole Region

No

SA3 Name	SA3 Code
Wanneroo	50503



Activity Consultation and Collaboration

Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- Hospital emergency department teams
- WA Health management
- National Health Service Directory
- Health Direct
- Department of Health, Disability and Ageing
- Other Australian PHNs commissioning UCCs

Collaboration

The PHN collaborated with the following stakeholders for design and implementation:

Emergency Department teams for the development and implementation of pathways of care WA Health management for strategic oversight of the UCC activity

Department of Health, Disability and Ageing as funder and for policy and communications resource Perth North HSPs for development of specific UCC models in designated regions

Department of Premier and Cabinet for strategic oversight of UCC activity

Local health care providers including Radiology and Pathology for design of patient pathways

General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)

Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCC



Activity Milestone Details/Duration

Activity Start Date

31/08/2025

Activity End Date

29/06/2028

Service Delivery Start Date

28/02/2026

Service Delivery End Date

30/06/2028



Other Relevant Milestones

Activity Work Plan Due: Oct 2025, 30/04/2026, 30/04/2027, 30/04/2028

Annual Needs Assessment Due: 15/11/2025, 15/11/2026, 15/11/2027, 15/11/2028

12-month Performance Report Due: 30/09/2026, 30/09/2027. 30/09/2028

Final Performance Report Due: 30/09/2028



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No **Open Tender:** Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$0.00	\$0.00	\$2,119,000.00	\$0.00	\$0.00	\$2,119,000.00
Total	\$0.00	\$0.00	\$2,119,000.00	\$0.00	\$0.00	\$2,119,000.00





UCC-MUCC - 1040 - Urgent Care Clinics - Mundaring



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC-MUCC

Activity Number

1040

Activity Title

Urgent Care Clinics - Mundaring

Existing, Modified or New Activity

New Activity



Activity Priorities and Description

Program Key Priority Area

Population Health

Aim of Activity

Strengthening Medicare and ensuring all Australians have access to affordable, high quality primary care services, when and where they need it is a priority for the Australian Government Department of Health, Disability an Ageing. A key objective of this commitment is to expand access to bulk billing Medicare Urgent Care Clinics (MUCCs).

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours 365 days a year and accept walk-in patients for specified urgent care presentations.

The Medicare UCCs will be:

- Co-located/partnered with a general practice that is accredited to a recognised and relevant standard such as the Royal Australian College of General Practitioner Standards for General Practice.
- Co-located with, or partnered alongside, General Practices that offer full bulk billing, where local circumstances allow.
- Operate extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).



Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and codesigned with relevant stakeholders to ensure connectivity to existing community health services, GPs, nongovernment sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening.
- Support integration with existing local health services and complement general practice.

Description of Activity

Mundaring Medicare Urgent Care Clinic

Background

In 2025 the Australian Government has committed \$664.3 million to establish 50 additional Medicare Urgent Care Clinics (MUCCs) across Australia, six of which will be located in Western Australia. These new clinics will be located in or near Bateman, Ellenbrook, Mirrabooka, Yanchep, Mundaring and Geraldton. Once established there will be a total of 14 MUCCs in WA.

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) to commission the six new MUCCs, focussed on specified actions that are intended to reduce pressure on emergency departments (ED) and improve access to urgent care for the local communities.

In September 2025, WAPHA undertook a competitive tender process for the establishment of Mundaring MUCC, the new clinic is expected to open in February 2026.

Roles and Responsibilities

WA Primary Health Alliance's (WAPHA's) Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PNPHN Mundaring MUCC activity. An executive sub-committee oversees all PNPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026.

WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with East Metro Health Service and St John of God Midland Public Hospital and Royal Perth Hospital, and working with the Department of Health, Disability and Ageing to monitor and support Medicare UCC operations, including compliance and contractual requirements.

Key activities

WAPHA will undertake a rigorous tender evaluation process to select an accredited and capable general practice or Aboriginal Community Controlled Health Service located in or near the Mundaring area. Once the successful provider is identified and commissioned, WAPHA will work with the provider to ensure understanding of, establishment of and maintain compliance with:

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities, access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, pathology as well as an x-ray facility and access to other radiology services.
- MUCC design principles. Ensuring that the MUCC is patient-focused, culturally appropriate and supports people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.



- Data onboarding and collection. Ensure utilisation of the Medicare UCC Data Module/Patient Management System and provide support to complete new fields where required. to ensure collection of activity data and inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system. Priorities for the next twelve months
- Commission an appropriate and capable provider to establish the MUCC
- Support the provider to meet all compliance and regulatory requirements of the MUCC operational guidelines
- Support the provider to commence service delivery prior to end of February 2026
- Support the provider to engage with key stakeholders to establish referral pathways
- Ensure the provider implements all data collection and reporting requirements
- Utilise the existing Memorandum of Understanding between East Metropolitan Health Service, the WA Department of Health and WAPHA, with all parties participating in a regular integration working group to develop streamlined pathways and communication channels to further enhance access to urgent care for the community.

Governance

The WA Medicare UCC steering committee has been established and meets regularly with representatives from the WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and the Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee. Internal oversight of progress, risk management and monitoring of the MUCC commissioning activities and ongoing performance is provided by an executive sub-committee, the Population Health Strategic Alignment Group.

Needs Assessment Priorities

Needs Assessment

WAPHA Needs Assessment 2025-2027

Priorities

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



Activity Demographics

Target Population Cohort

People with urgent care needs that cannot be addressed in a timely manner by their usual GP, and who do not need emergency treatment.

Indigenous Specific

No



Coverage

Whole Region

No

SA3 Name	SA3 Code
Mundaring	50402



Activity Consultation and Collaboration

Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- Hospital emergency department teams
- WA Health
- National Health Service Directory
- Health Direct
- Department of Health, Disability and Ageing
- Other Australian PHNs commissioning UCCs

Collaboration

The PHN collaborated with the following stakeholders for design and implementation:

Emergency Department teams for the development and implementation of pathways of care WA Health management for strategic oversight of the UCC activity

Department of Health, Disability and Ageing as funder and for policy and communications resource Perth North HSPs for development of specific UCC models in designated regions

Department of Premier and Cabinet for strategic oversight of UCC activity

Local health care providers including Radiology and Pathology for design of patient pathways General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)

Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCC Data Collection – Only Mandatory for PMHC-MDS



Activity Milestone Details/Duration

Activity Start Date

31/08/2025

Activity End Date

29/06/2028

Service Delivery Start Date

28/02/2026

Service Delivery End Date

30/06/2028



Other Relevant Milestones

Activity Work Plan Due: Oct 2025, 30/04/2026, 30/04/2027, 30/04/2028

Annual Needs Assessment Due: 15/11/2025, 15/11/2026, 15/11/2027, 15/11/2028

12-month Performance Report Due: 30/09/2026, 30/09/2027, 30/09/2028

Final Performance Report Due: 30/09/2028



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No **Open Tender:** Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$0.00	\$0.00	\$1,769,000.00	\$0.00	\$0.00	\$1,769,000.00
Total	\$0.00	\$0.00	\$1,769,000.00	\$0.00	\$0.00	\$1,769,000.00





UCC-MUCC - 1050 - Urgent Care Clinics - Ellenbrook



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC-MUCC

Activity Number

1050

Activity Title

Urgent Care Clinics - Ellenbrook

Existing, Modified or New Activity

New Activity



Activity Priorities and Description

Program Key Priority Area

Population Health

Aim of Activity

Strengthening Medicare and ensuring all Australians have access to affordable, high quality primary care services, when and where they need it is a priority for the Australian Government Department of Health, Disability an Ageing. A key objective of this commitment is to expand access to bulk billing Medicare Urgent Care Clinics (MUCCs).

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours 365 days a year and accept walk-in patients for specified urgent care presentations.

The Medicare UCCs will be:

- Co-located/partnered with a general practice that is accredited to a recognised and relevant standard such as the Royal Australian College of General Practitioner Standards for General Practice.
- Co-located with, or partnered alongside, General Practices that offer full bulk billing, where local circumstances allow. Operate extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).



Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and codesigned with relevant stakeholders to ensure connectivity to existing community health services, GPs, nongovernment sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening.
- Support integration with existing local health services and complement general practice.

Description of Activity

Ellenbrook Medicare Urgent Care Clinic

Background

In 2025 the Australian Government has committed \$664.3 million to establish 50 additional Medicare Urgent Care Clinics (MUCCs) across Australia, six of which will be located in Western Australia. These new clinics will be located in or near Bateman, Ellenbrook, Mirrabooka, Yanchep, Mundaring and Geraldton. Once established there will be a total of 14 MUCCs in WA.

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) to commission the six new MUCCs, focussed on specified actions that are intended to reduce pressure on emergency departments (ED) and improve access to urgent care for the local communities.

In August 2025, WAPHA undertook a competitive tender process for the establishment of the Ellenbrook MUCC, the new clinic is expected to open before 25 December 2025.

Roles and Responsibilities

WA Primary Health Alliance's (WAPHA's) Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PNPHN Ellenbrook MUCC activity. An executive sub-committee oversees all PNPHN MUCC activity to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026.

WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with East Metro Health Service and St John of God Midland Public Hospital, and working with the Department of Health, Disability and Ageing to monitor and support Medicare UCC operations, including compliance and contractual requirements.

Key activities

WAPHA will undertake a rigorous tender evaluation process to select an accredited and capable general practice or Aboriginal Community Controlled Health Service located in or near the Ellenbrook area. Once the successful provider is identified and commissioned, WAPHA will work with the provider to ensure understanding of, establishment of and compliance with:

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities, access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, pathology as well as an x-ray facility and access to other radiology services.



- MUCC design principles. Ensuring that the MUCC is patient-focused, culturally appropriate and supports people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.
- Data onboarding and collection. Ensure utilisation of the Medicare UCC Data Module/Patient Management System and provide support to complete new fields where required. to ensure collection of activity data and inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system. Priorities for the next twelve months
- Commission an appropriate and capable provider to establish the MUCC
- Support the provider to meet all compliance and regulatory requirements of the MUCC operational guidelines
- Support the provider to commence service delivery prior to 25 December 2025
- Support the provider to engage with key stakeholders to establish referral pathways
- Ensure the provider implements all data collection and reporting requirements
- Utilise the existing Memorandum of Understanding between East Metropolitan Health Service, the WA Department of Health and WAPHA, with all parties participating in a regular integration working group to develop streamlined pathways and communication channels to further enhance access to urgent care for the community

Governance

The WA Medicare UCC steering committee has been established and meets regularly with representatives from the WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and the Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee.

Internal oversight of progress, risk management and monitoring of the MUCC commissioning activities and ongoing performance is provided by an executive sub-committee, the Population Health Strategic Alignment Group.

Needs Assessment Priorities

Needs Assessment

WAPHA Needs Assessment 2025-2027

Priorities

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



Activity Demographics

Target Population Cohort

People with urgent care needs that cannot be addressed in a timely manner by their usual GP, and who do not need emergency treatment.





Indigenous Specific

No

Coverage

Whole Region

No

SA3 Name	SA3 Code
Swan	50403



Activity Consultation and Collaboration

Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- Hospital emergency department teams
- WA Health management
- National Health Service Directory
- Health Direct
- Department of Health, Disability and Ageing
- Other Australian PHNs commissioning UCCs

Collaboration

The PHN collaborated with the following stakeholders for design and implementation:

Emergency Department teams for the development and implementation of pathways of care WA Health management for strategic oversight of the UCC activity

Department of Health, Disability and Ageing as funder and for policy and communications resource Perth North HSPs for development of specific UCC models in designated regions

Department of Premier and Cabinet for strategic oversight of UCC activity

Local health care providers including Radiology and Pathology for design of patient pathways

General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)

Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCC



Activity Milestone Details/Duration

Activity Start Date

31/08/2025

Activity End Date

29/06/2028



Service Delivery Start Date

25/12/2025

Service Delivery End Date

30/06/2028

Other Relevant Milestones

Activity Work Plan Due: Oct 2025, 30/04/2026, 30/04/2027, 30/04/2028

Annual Needs Assessment Due: 15/11/2025, 15/11/2026, 15/11/2027

12-month Performance Report Due: 30/09/2026, 30/09/2027, 30/09/2028

Final Performance Report Due: 30/09/2028



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No **Open Tender:** Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$0.00	\$0.00	\$1,939,000.00	\$0.00	\$0.00	\$1,939,000.00
Total	\$0.00	\$0.00	\$1,939,000.00	\$0.00	\$0.00	\$1,939,000.00





UCC-MUCC - 1060 - Urgent Care Clinics - Mirrabooka



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC-MUCC

Activity Number

1060

Activity Title

Urgent Care Clinics - Mirrabooka

Existing, Modified or New Activity

New Activity



Activity Priorities and Description

Program Key Priority Area

Population Health

Aim of Activity

Strengthening Medicare and ensuring all Australians have access to affordable, high quality primary care services, when and where they need it is a priority for the Australian Government Department of Health, Disability an Ageing. A key objective of this commitment is to expand access to bulk billing Medicare Urgent Care Clinics (MUCCs).

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours 365 days a year and accept walk-in patients for specified urgent care presentations.

The Medicare UCCs will be:

- Co-located/partnered with a general practice that is accredited to a recognised and relevant standard such as the Royal Australian College of General Practitioner Standards for General Practice.
- Co-located with, or partnered alongside, General Practices that offer full bulk billing, where local circumstances allow.
- Operate extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).



Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and codesigned with relevant stakeholders to ensure connectivity to existing community health services, GPs, nongovernment sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening.
- Support integration with existing local health services and complement general practice.

Description of Activity

Mirrabooka Medicare Urgent Care Clinic

Background

In 2025 the Australian Government has committed \$664.3 million to establish 50 additional Medicare Urgent Care Clinics (MUCCs) across Australia, six of which will be located in Western Australia. These new clinics will be located in or near Bateman, Ellenbrook, Mirrabooka, Yanchep, Mundaring and Geraldton. Once established there will be a total of 14 MUCCs in WA.

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) to commission the six new MUCCs, focussed on specified actions that are intended to reduce pressure on emergency departments (ED) and improve access to urgent care for the local communities.

In August 2025, WAPHA undertook a competitive tender process for the establishment of the Mirrabooka MUCC, the new clinic is expected to open before 25 December 2025.

Roles and Responsibilities

WA Primary Health Alliance's (WAPHA's) Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PNPHN Mirrabooka MUCC activity. An executive sub-committee oversees all PNPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026.

WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with North Metro Health Service, Joondalup Health Campus, Sir Charles Gairdner Hospital, Perth Children's Hospital, and working with the Department of Health, Disability and Ageing to monitor and support Medicare UCC operations, including compliance and contractual requirements.

Key activities

WAPHA will undertake a rigorous tender evaluation process to select an accredited and capable general practice or Aboriginal Community Controlled Health Service located in or near the Mirrabooka area. Once the successful provider is identified and commissioned, WAPHA will work with the provider to ensure understanding of, establish and maintain compliance with:

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities, access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, pathology as well as an x-ray facility and access to other radiology services.



- MUCC design principles. Ensuring that the MUCC is patient-focused, culturally appropriate and supports people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.
- Data onboarding and collection. Ensure utilisation of the Medicare UCC Data Module/Patient Management System and provide support to complete new fields where required. to ensure collection of activity data and inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system.

Priorities for the next twelve months

- Commission an appropriate and capable provider to establish the MUCC
- Support the provider to meet all compliance and regulatory requirements of the MUCC operational guidelines
- Support the provider to commence service delivery prior to 25 December 2025
- Support the provider to engage with key stakeholders to establish referral pathways
- Ensure the provider implements all data collection and reporting requirements
- Utilise the existing Memorandum of Understanding between North Metropolitan Health Service, the WA Department of Health and WAPHA, with all parties participating in a regular integration working group to develop streamlined pathways and communication channels to further enhance access to urgent care for the community.

Governance

The WA Medicare UCC steering committee has been established and meets regularly with representatives from the WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and the Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee.

Internal oversight of progress, risk management and monitoring of the MUCC commissioning activities and ongoing performance is provided by an executive sub-committee, the Population Health Strategic Alignment Group.

Needs Assessment Priorities

Needs Assessment

WAPHA Needs Assessment 2025-2027

Priorities

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



Activity Demographics

Target Population Cohort

People with urgent care needs that cannot be addressed in a timely manner by their usual GP, and who do not need emergency treatment



Indigenous Specific

No

Coverage

Whole Region

No

SA3 Name	SA3 Code
Stirling	50502



Activity Consultation and Collaboration

Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- Hospital emergency department teams
- WA Health management
- National Health Service Directory
- Health Direct
- · Department of Health, Disability and Ageing
- Other Australian PHNs commissioning UCCs

Collaboration

The PHN collaborated with the following stakeholders for design and implementation:

Emergency Department teams for the development and implementation of pathways of care WA Health management for strategic oversight of the UCC activity

Department of Health, Disability and Ageing as funder and for policy and communications resource Perth North HSPs for development of specific UCC models in designated regions

Department of Premier and Cabinet for strategic oversight of UCC activity

Local health care providers including Radiology and Pathology for design of patient pathways

General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)

Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCC Data



Activity Milestone Details/Duration

Activity Start Date

31/08/2025

Activity End Date

29/06/2028



Service Delivery Start Date

25/12/2025

Service Delivery End Date

30/06/2028

Other Relevant Milestones

Activity Work Plan Due: Oct 2025, 30/04/2026, 30/04/2027, 30/04/2028

Annual Needs Assessment Due: 15/11/2025, 15/11/2026, 15/11/2027, 15/11/2028

12-month Performance Report Due: 30/09/2026, 30/09/2027, 30/09/2028

Final Performance Report Due: 30/09/2028



Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No **Open Tender:** Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$0.00	\$0.00	\$2,299,000.00	\$0.00	\$0.00	\$2,299,000.00
Total	\$0.00	\$0.00	\$2,299,000.00	\$0.00	\$0.00	\$2,299,000.00



UCC -CSS - 1000 - Capital, signage and specialist funding



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC -CSS

Activity Number

1000

Activity Title

Capital, signage and specialist funding

Existing, Modified or New Activity

New Activity



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Capital, signage, and specialist funding	\$0.00	\$0.00	\$3,627,121.07	\$0.00	\$0.00	\$3,627,121.07
Total	\$0.00	\$0.00	\$3,627,121.07	\$0.00	\$0.00	\$3,627,121.07



UCC-PSF 1000 - PHN Support Funding



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC-PSF

Activity Number

1000

Activity Title

UCC-PSF 1000 - PHN Support Funding and Interest

Existing, Modified or New Activity

Existing



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
PHN Support Funding	\$175,464.14	\$700,082.05	\$1,187,022.57	\$0.00	\$0.00	\$2,062,568.76
Total	\$175,464.14	\$700,082.05	\$1,187,022.57	\$0.00	\$0.00	\$2,062,568.76



UCC-SE 1000 - Specialist Equipment



Applicable Schedule

Urgent Care Clinics Program - Perth North

Activity Prefix

UCC-SE

Activity Number

1000

Activity Title

UCC-SE 1000 - Specialist Equipment

Existing, Modified or New Activity

Modified



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Specialist Equipment	\$1,432,365.88	\$1,432,365.88	\$0.00	\$0.00	\$0.00	\$2,864,731.76
Total	\$1,432,365.88	\$1,432,365.88	\$0.00	\$0.00	\$0.00	\$2,864,731.76